Division of Mental Health and Substance Abuse Services



RESEARCH NOTE 2

December 2006

Trends in Admissions and Primary Substance of Abuse at the Regional Human Service Centers

At the time of admission to a Regional Human Service Center for substance abuse treatment, consumers are asked to identify their primary substance of abuse. This document reports:

- 1. the number of clients admitted for treatment at a Regional Human Service Center, and
- 2. the primary substances of abuse.

All clients served or treated within calendar years 2002, 2004, and 2005 are included in the table below. The number of *clients served* is more inclusive of a broader range of services such as information and referral, education, case management and evaluation only. *Clients treated* is a more restrictive count and includes clients receiving treatment for substance abuse addiction only. Any client served within the calendar year is counted. A client admitted again during the same calendar year is counted again.

	2002	2004	2005
Clients served	5,390	5,107	6,262
Clients treated	3,027	3,638	4,008

Table1 and Figure 1 demonstrate the following. Alcohol and marijuana are the top two primary substances of abuse identified in all three years. Alcohol, as the top primary substance

continues to increase in number (1,902 in 2002 to 2,170 in 2005). As a percent of total, alcohol has decreased from 63% in 2002 to 55% in 2005. Marijuana, the next top substance of abuse, continues to increase as well. Marijuana is identified as the primary substance of abuse in just over one-third the number of admissions as alcohol. Marijuana increased in number (702 in 2002 to 821 in 2005). But as a percent of total, marijuana use decreased (23% in 2002 to 20% in 2005).

The number of admissions for methamphetamine (meth) (See Glossary) use increased by 88% (272 in 2002 to 511 in 2005). As a percent of total, admissions for meth use increased from 9% in 2002 to 13% in 2005. The number of admissions from amphetamines (See Glossary) increased by 227% (52 in 2002 to 170 in 2005). As a percent of total, admissions from amphetamine use increased from 2% in 2002 to 4% in 2005. The number of admissions for cocaine use increased slightly from 36 in 2002 to 40 in 2005. As a percent of total, admissions for cocaine (See Glossary) use remained the same (1%). Admissions for other drug use increase from 62 in 2002 to 296 in 2005. As a percent of total, admissions for other drug use increased from 2% in 2002 to 7% in 2005.

"Our mission is to provide quality, efficient and effective human services, which improve the lives of people."

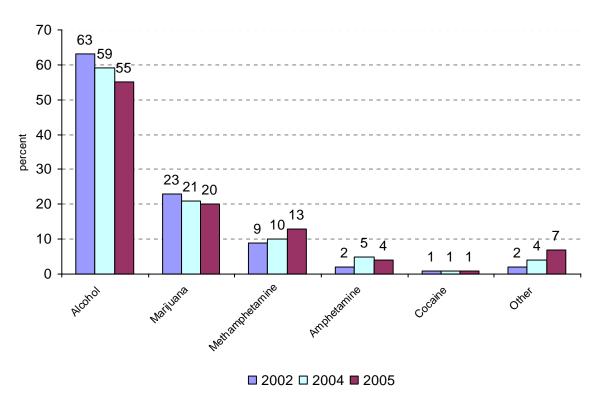
Division of Mental Health & Substance Abuse Services 1237 West Divide Avenue, Suite 1C, Bismarck, ND 58501

Phone: 701-328-8920 Fax: 701-328-8969 TTY 701-328-8968 E-mail: dhsmhsas@nd.gov
Research Team: Dr. Mariah Tenamoc, Sue Tohm, Elizabeth Cunningham, Myrna Bala,
Maria Gokim, Colleen Kummet, Thomas Morth, Michaela Schirado

Table 1. Total Number and Percent of Each Primary Substance

	2002		2004		2005	
	#	%	#	%	#	%
Alcohol	1902	63%	2136	59%	2170	55%
Marijuana	702	23%	747	21%	821	20%
Methamphetamine	272	9%	387	10%	511	13%
Amphetamine	53	2%	174	5%	170	4%
Cocaine	36	1%	38	1%	40	1%
Other	62	2%	156	4%	296	7%
TOTAL	3027	100%	3638	100%	4008	100%

Figure 1. Top Five Primary Substances of Abuse by Admissions, CY 2002, 2004 and 2005



The 'route of use' is presented for meth, amphetamine and cocaine (Table 2 and Figures 2, 3, and 4). Federal law requires that that Providers give preference to injection drug users in accessing treatment services. Injection drug use places one at a greater risk for HIV and Hepatitis infections.

The main route of use for meth (Table 2) is smoking, increasing by almost 200% (114 in 2002 to 341 in 2005). As a percent of total for route of use, smoking meth increased from 42% in 2002 to 63% in 2005 (Figure 2). Injection is the second most common route of use for meth, decreasing from 38% among all meth users in 2002 to 29% in 2005. Inhalation is the third most common route of use, decreasing from 17% in 2002 to 6% in 2005.

The main 'route of use' for amphetamines (Table 2) increased from 18 in 2002 to 102 in 2005 Injection, the second most common route of use for amphetamine, decreased from 28% among all amphetamine users in 2002 to 12% in 2005 (Figure 3). As a percent of total route of use, smoking amphetamines went from 34% in 2002 to 59% in 2005. While intravenous use of amphetamine increased in number from 15 in 2002 to 40 in 2005, as a percent of total for route of use, intravenous use decreased from 28% in 2002 to 24% in 2005.

The 'route of use' for cocaine (Table 2 4) most frequently identified is also smoking (12 in 2002 to 23 in 2005). Among all cocaine users and route of use, smoking cocaine went from 33% in 2002 to 58% in 2005 (Figure 4). Injection as route of use of cocaine decreased from 28% in 2002 to 12% in 2005.

Table 2. Route of Use for Meth, Amphetamine, and Cocaine

			Me	eth			
	20	2002		2004		2005	
	#	%	#	%	#	%	
Oral	9	3%	8	2%	7	1%	
Smoking	114	42%	226	59%	321	63%	
Inhalation	47	17%	32	8%	30	6%	
Injection	102	38%	117	30%	148	29%	
Other	0	0%	4	1%	5	1%	
TOTAL	272	100%	387	100%	511	100%	

		Amphetamine					
	2002	2002 2004		2005			
	#	%	#	%	#	%	
Oral	9	17%	7	4%	5	3%	
Smoking	18	34%	101	58%	102	59%	
Inhalation	9	17%	23	13%	15	9%	
Injection	15	28%	39	22%	40	24%	
Other	2	4%	4	3%	8	5%	
TOTAL	53	100%	174	100%	170	100%	

	Cocaine					
	2002	2004		2005		
	#	%	#	%	#	%
Oral	1	3%	1	3%	0	0%
Smoking	12	33%	15	39%	23	58%
Inhalation	13	36%	11	29%	10	25%
Injection	10	28%	10	26%	5	12%
Other	0	0%	1	3%	2	5%
TOTAL	36	100%	38	100%	40	100%

Figure 2. Third Primary Substance of Abuse and Route of Use – Methamphetamine by Admissions (n=272 in 2002, n=387 in 2004, n=511 in 2005)

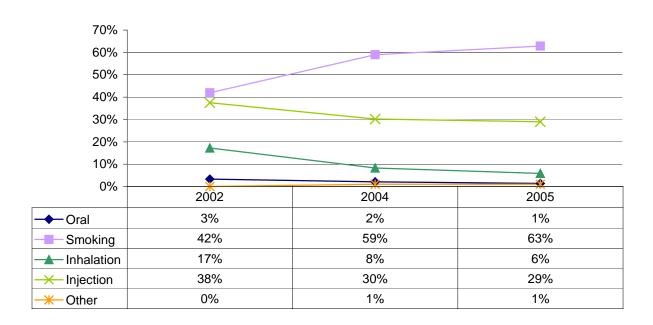


Figure 3. Fourth Primary Substance of Abuse and Route of Use – Amphetamine by Admissions (n=53 in 2002, n=174 in 2004, n=170 in 2005)

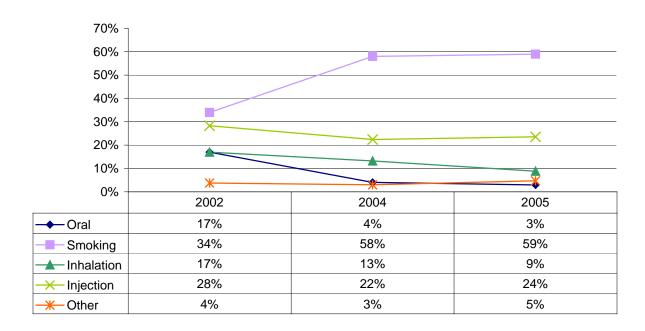
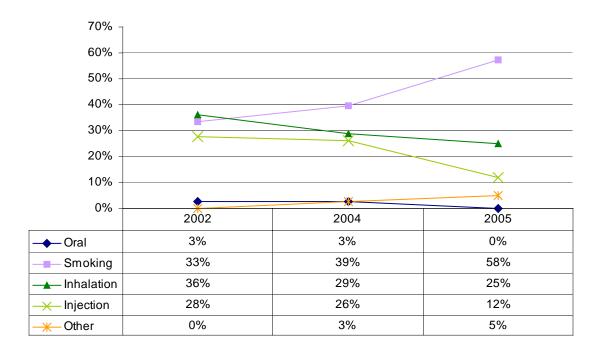


Figure 4. Fifth Primary Substance of Abuse and Route of Use – Cocaine by Admissions (n=36 in 2002, n=38 in 2004, n=40 in 2005)



GLOSSARY

Methamphetamine

A stimulant drug chemically related to amphetamine but with stronger effects on the central nervous system. Street names for the drug include "speed," "meth," and "crank." The drug produces euphoria, decreased appetite, insomnia, and other side effects.

Amphetamine

Stimulant drugs whose effects are very similar to cocaine. They increase the activity of certain chemicals in the brain. Street names for amphetamines include uppers, go fast, zip, whizz.

Cocaine

A powerful short-acting stimulant, similar to amphetamines. Its effects include euphoria, restlessness, excitement, and a feeling of well-being. Slang names include "coke," "flake," "star dust," and "snow." Freebasing, a process of converting cocaine into a form that can be smoked (usually called crack), involves heating with either lighter fluid or other solvents.